

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33074
Name: Dart Cherokee Basin Operating Co., LLC
Address: P O Box 177
City/State/Zip: Mason MI 48854-0177
Purchaser: Oneok
Operator Contact Person: Beth Oswald
Phone: (517) 244-8716
Contractor: Name: McPherson
License: 5675
Wellsite Geologist: Bill Barks

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>4-1-04</u>	<u>4-5-04</u>	<u>4-12-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25730-00-00
County: Wilson
SE SE Sec. 25 Twp. 30 S. R. 14 East West
660' FSL _____ feet from S / N (circle one) Line of Section
660' FEL _____ feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Neill Bros Well #: D4-25
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 923' Kelly Bushing: _____
Total Depth: 1509' Plug Back Total Depth: 1502'
Amount of Surface Pipe Set and Cemented at 43 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT#2 KGR 6/10/07
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Beth Oswald
Title: Admn & Engr Asst Date: 6-25-04
Subscribed and sworn to before me this 25th day of June,
2004
Notary Public: Karen L. Welton
Date Commission Expires: _____
*Karen L. Welton
Notary Public, Ingham County, MI
My Comm. Expires Mar. 3, 2007
Acting in Ingham County*

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

ORIGINAL

Side Two

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Neill Bros Well #: D4-25
 Sec. 25 Twp. 30 S. R. 14 East West County: Wilson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: High Resolution Compensated Density Neutron & Dual Induction	Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum See Attached
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CASING RECORD							
				New	Used		
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surf	11"	8 5/8"		43'	Class A	10	
Prod	6 3/4"	4 1/2"	9.5#	1502'	50/50 Poz	200	See Attached

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	1162.5'-1163.5'	300 gal 10% HCl, 1710# sd, 260 BBL fl	
4	1102'-1104'	300 gal 10% HCl, 1690# sd, 225 BBL fl	
4	1039.5'-1040.5'	300 gal 10% HCl, 1365# sd, 185 BBL fl	
4	990'-993.5'	300 gal 10% HCl, 7255# sd, 415 BBL fl	
4	871'-872'	300 gal 10% HCl, 1810# sd, 225 BBL fl	

TUBING RECORD	Size 2 3/8"	Set At 1397'	Packer At NA	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Date of First, Resumed Production, SWD or Enhr. 6-8-04	Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>
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Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 13	Water Bbls. 74	Gas-Oil Ratio NA	Gravity NA
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) _____

McPherson Drilling LLC Drillers Log

Rig Number: 1	S. 25	T. 30	R. 14
API No. 15- 205-25730	County: WL		
Elev. 923'	Location: SE, SE		

Operator: Dart Cherokee Basin Operating Co. LLC			
Address: 3541 CR 5400 Independence, KS 67301			
Well No: D4-25	Lease Name: Neill Bros.		
Footage Location:	275 ft. from the South Line		
	4502 ft. from the East Line		
Drilling Contractor: McPherson Drilling LLC			
Spud date: 4/1/2004	Geologist:		
Date Completed: 4/5/2004	Total Depth: 1509'		

Gas Tests:
Comments:
Start injecting water @ 343'

Casing Record			Rig Time:
	Surface	Production	1 day booster
Size Hole:	11"	6 3/4"	
Size Casing:	8 5/8"		
Weight:	23#		
Setting Depth:	43'	McPherson	
Type Cement:	Portland		
Sacks:	9	McPherson	

Well Log										
Formation	Top	Btm.		Formation	Top	Btm.		Formation	Top	Btm.
soil	0	4		black shale	894	903		sand shale	1301	1313
lime	4	12		sand shale	903	948		coal	1313	1316
shale	12	23		1st Oswego	948	972		shale	1316	1355
lime	23	59		Summit	972	981		coal	1355	1357
shale	59	99		2nd Oswego	981	994		sand shale	1357	1364
lime	99	118		Mulky	994	1000		Mississippian	1364	1509
shale	118	286		3rd Oswego	1000	1008				TD
sand	286	321 wet-		sand shale	1008	1041				
shale	321	365 no sho		coal	1041	1044				
sand	365	417 no sho		shale	1044	1060				
lime	417	426		coal	1060	1062				
shale	426	438		sandy shale	1062	1101				
lime	438	542		coal	1101	1103				
sand/shale	542	575		shale	1103	1115				
lime	575	601		coal	1115	1117				
shale	601	635		sand shale	1117	1128				
lime	635	652		oil sand	1128	1146				
shale	652	703		coal	1146	1148				
lime	703	725		shale	1148	1160				
sand shale	725	741		coal	1160	1162				
lime	741	750		shale	1162	1172				
sand shale	750	873		sand	1172	1191				
coal	873	875		shale	1191	1218				
pink lime	875	894		sand	1218	1301				

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JUN 28 2004
KCC WICHITA



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 23685

LOCATION Bartlesville

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
4-6-04	2368	Deill Bros. D4-25		25	30S	19E	Wilson	
CHARGE TO <u>Dart</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE Production Casing		525.00
1105	3 sks	Cottonseed Hulls		38.85
1107	3 sks	Flo Seal		113.25
1110	20 sks	Gilsonite		388.00
1111	500#	Granulated Salt		125.00
1118	6 sks	Premium Gel		70.80
1123	2000 gal	City Water		28.15
4404	1	4 1/2" Rubber Plug		22.00
1205	1 1/2 gal	Supersweet		33.15
1238	1 gal	Mud Flush		30.00
BLENDING & HANDLING				
5407	min	TON-MILES	RECEIVED	190.00
		STAND BY TIME		
		MILEAGE	JUN 28 2004	
5501	4 hrs	WATER TRANSPORTS		380.00
5502	3 hrs	VACUUM TRUCKS	KCC WICHITA	225.00
		FRAC SAND		
1124	200 sks	CEMENT		1320.00
			Wilson Co. 6.3% SALES TAX	136.18 OK
				136.18
ESTIMATED-TOTAL				3621.58

Revin 2790

CUSTOMER or AGENTS SIGNATURE Willie Batts CIS FOREMAN Tracy L. Williams

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

789652

CONSOLIDATED OIL WELL SERVICES, INC.

211 W. 14TH STREET, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER **30078**

LOCATION **Barlesville**
FOREMAN **Tracy Williams**

TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME	FORMATION
4-6-04	2368	Well Bros. #15	
SECTION	TOWNSHIP	RANGE	COUNTY
25	30S	14E	Wilson
CUSTOMER			
Dart			
MAILING ADDRESS			
CITY			
STATE			
ZIP CODE			
TIME ARRIVED ON LOCATION			

WELL DATA	
HOLE SIZE	PACKER DEPTH
6 7/8	
TOTAL DEPTH	PERFORATIONS
1509	
CASING SIZE	OPEN HOLE
4 1/2	
CASING DEPTH	TUBING SIZE
1502	
CASING WEIGHT	TUBING DEPTH
9.5	
CASING CONDITION	TUBING WEIGHT
24.4	
TUBING CONDITION	
TREATMENT VIA	

TRUCK #	DRIVER	TRUCK #	DRIVER
418	Tim		
418	Steve H		
438	Danny		
226	Donnie		

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISF. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

PRESSURE LIMITATIONS	
THEORETICAL	INSTRUCTED
SURFACE PIPE	
ANNULUS LONG STRING	
TUBING	

INSTRUCTION PRIOR TO JOB Ran 10 bbl water, 2 skgs gel with 1 Hull, 5 bbl water, 15 bbl mud flush, while breaking circ. Ran 200 sks 50/50 oz mix with 5# gel, 5% salt, 2% gel, 1/4" @ 13.5 ppg. Shutdown washed up behind plug. Pumped plug to bottom & set shoe. Shut in. Circulated 11 bbl cement slurry to pit.

AUTHORIZATION TO PROCEED: William D. ... TITLE: _____ DATE: _____

TIME AM/PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SANDY STAGE	PSI	
							BREAKDOWN PRESSURE
							DISPLACEMENT
							MIX PRESSURE
							MIN PRESSURE
							ISIP
							15 MIN
							MAX RATE
							MIN RATE

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